DEPARTMENT OF PUBLIC HEALTH AND HUMAN SERVICES

BRIAN GOVE

BRIAN SCHWEITZER GOVERNOR JOAN MILES

STATE OF MONTANA

Developmental Disabilities Program 406-444-2995

111 N. Sanders Room 305 PO Box 4210 Helena, MT 59604

Date:

June 30, 2008

To:

Don Nevrivy, Director Malta Opportunities, Inc.

From:

Sandra L. Carpenter, QIS

Subject:

Quality Assurance Review FY '07

Please find attached report for the Quality Assurance Review for Malta Opportunities, Inc. I wish to express my appreciation to you and your staff for all the assistance provided to me during the course of this review and while Cindy Frederickson, QIS and I were on-site.

During the review, the use of Quality Assurance Observation Sheets (QAOS) was used to record exemplary practices and indicated deficiencies. The QAOS is a record of what is observed and which Administrative Rule, DDP Policy or contract requirement is surpassed or deficient. There were **5** commendations and **4** deficiencies. Deficiencies noted in this review's QAOS have been addressed. Prior QAOS and the subsequent letter of contract deficiency is still open and pending.

If you have any questions or comments, I would be happy to discuss them with you. Feel free to call or email. I look forward to a continuing relationship with staff and individuals served by Malta Opportunities, Inc.

CC:

Roger Solberg, President, MOI Board of Directors Dain Christianson, Region 1 Regional Manager Tim Plaska, Bureau Chief, DDP John Zeeck, Quality Assurance Specialist, DDP Perry Jones, Waiver Specialist, DDP DDP Contract File

Attachments

Malta Opportunities, Inc. QUALITY ASSURANCE REVIEW Through May, 2008

SCOPE OF REVIEW

The purpose of this summary is to evaluate the quality of services provided to individuals with developmental disabilities by Malta Opportunities, Inc. (MOI). The services reviewed are the following: Community Home, Supported Living, Work/Day services and Transportation. MOI also serves 3 individuals with funding through Community Supports. Information was garnered through personal observations, interviews and review of documentation on-site as well as a desk review of data collected through the review period including quarterly reports.

Administrative

- Malta Opportunities, Inc. is a non-profit corporation governed by a Board of Directors. Daily operations are under the direction of Don Nevrivy, Executive Director. MOI serves 18 individuals.
- MOI conducted a satisfaction survey with a 44% return. This is a great tool for agency wide long term planning and is to be commended (QAOS #6). Some comments include:
 - o "MOI makes it possible for the clients to have a life."
 - o "...the building is the pitts. Cold in winter/hot in summer..."
 - o "An excellent program that provides a safe, nurturing environment for the handicap."
- MOI received a DDPHS Quality Assurance Division audit to analyze how MOI is doing in regards to the new rates system of reimbursement and looked at 10 general audit objectives. The audit recommended that MOI determine how administrative time is to be allocated. MOI responded by saying they would do a week-long time study 2 times a year. Also recommended was that revenue be matched to expenses. MOI responded saying they are matching revenues to the month they are earned by creating an invoice matched to the month of service starting July 1, 2007. Another recommendation was to adjust a year-end grant and it was completed. The final recommendation concerned client funds. The audit recommends that MOI review the Social Security Agency's

- Guide for Organizational Representative Payees, separate bank accounts, use two signatures and to monitor payee accounts so that individuals do not go over the \$2000 resource limit. MOI responded saying they would review the Guide, that they are establishing separate bank accounts for client funds that are separate from any SSI/SSA fund accounts and to review deposits and expenses for accuracy.
- MOI has committed to weekly Incident Management Meetings. These
 meetings have established a committee and a routine where personnel
 from all program areas meet to discuss incidents. Minutes are kept and
 follow-up is being done (QAOS #8). This is also a time where health and
 safety issues are staffed. Good Job, MOI!
- Staff training records had some blanks with the noticeable blank being the lack of a repeat background check for a re-hire (QAOS #2). MOI responded saying they were not aware the previous background check was not sufficient and a new background check was completed immediately.
- MOI has a couple of recent new hires, including a new group home manager.
- All employees required to complete Tier 1 of the College of Direct Support, an on-line learning environment for direct care workers, have done so. Even with this training and training from Adult Protective Services during the year, regular staff still insisted that allegation of abuse be reported to a supervisor first and that the supervisor would then be responsible for reporting to the appropriate agencies (QAOS #3). Malta responded that staff are still confused about reporting requirements and that training will be implemented followed by a test.
- The group home is licensed under a temporary license until October 2008 due to issues of deficiency due to APS investigations into reports of exploitation and reports of neglect, reports of individuals having their rights restricted without team approval, individuals not having their plans of care implemented and overall maintenance decline especially in the bathrooms with mold and dusty ceiling fans (QAOS #1). These issues are also addressed in a DDP letter of contract non-compliance; please see below. In regards to the unsanitary conditions, Malta responded by formulating a cleaning list to be documented and forwarded to Executive Director, the caulk has been replaced and ceiling fan cleaned and that a bathroom cleanliness/condition section is added to the GH monthly safety check. Evidence of these practices was submitted to the Regional Office and bathrooms do look better. There is still some damaged due to a past residents behavior and those projects are being tackled.
- The group home has also missed a monthly fire drill due to a change in management (QAOS #5). Malta explained that 2 drills had been done in March, one at the beginning and another near the end and that the new manager was not aware of the fire drill procedure. Group home manager has now been informed of the procedure and reports will be forwarded to the Executive Director.

Residential Services

- The Malta Group Home is licensed for 8 residents but only 6 currently live there; 4 men and 2 women. The group home had a previous resident that proved to be a bit of a destructive force and caused significant damage to the group home. The group home has and is being repaired with the assistance of a grant from DDP.
- Service delivery at the group home is being restructured under corrective action and a new manager. It is a daunting job as the group home record keeping system was disorganized. Although there has been lack of personal plan implementation and data keeping from the current corrective action as well as some health and safety considerations such as missing information for medication administration records. Progress is being made and monitored by DDP and case management. Some progress noted during a recent staffing have been increased community outings and increased participation in daily life, re-organized data books and med administration logs with current and correct information. Please keep working!

Supported Living

- Malta Opportunities provides supports for 6 individuals in supported living.
 2 reside with family while 4 have apartments of their own in a housing area called Cedar View.
- Individuals in supported living are well-received in their community and well-liked (QAOS #9). An individual was given a surprise birthday party from community members. Business have hired MOI to provide crews for cleaning and sweeping and know they can have a cheerful face from MOI's SL folks. This is a strength of the agency in that supported living folks are comfortable living in their own homes and being an active members of the community.
- Another success this year is the move of an individual from the group home into his own apartment (QAOS #4).
- Supported Living data keeping is also disorganized and needs a little boost before objectives start to get missed or not implemented.
- Individuals in supported living may also receive assistance from a personal care agency. Between both agencies, health and safety needs are being met.

Work/Day Services

 Malta Opportunities, Inc. provides work activity center for their residential folks and 2 others from in the community. Work activities include recycling, laundry, job crews, a thrift store, janitorial, a rag rug loom and weekly newspaper ad delivery. Individuals are active and enjoy their work.

- Data is present for files reviewed however a decline in over all data organization is noted.
- The work activity center had zero turnover this last year (QAOS #7).
 Individuals have staff that know them and have consistent supervision and training in realizing their goals.

Community Supports

- Malta Opportunities, Inc. supports 3 individuals with Community Supports.
 The trainer who works with them is also a supported living trainer. Staff
 training requirements met for supported living are also met in this setting
 as well.
- Community Supports provides such services as transportation mileage for an individual to get to competitive employment, education, safety checks and general supervision.
- Individuals who receive community supports are very involved in their lives and their communities and often will join the folks from supported living for special nights together where they might play games or share meals or go out on the town. People are happy with their services.

Transportation

- Malta Opportunities, Inc. has consolidated their transportation services into the local transit authority, Phillips County Transit. The executive director is a member of that authority board.
- Malta does not have any vehicles they operate exclusively. The transit authority handles all applicable rules, regulation and maintenance. MOI staff who are also drivers must abide by the training and procedure requirements set forth by the authority.

Conclusion

Although Malta Opportunities, Inc. is going through some long over due changes, they remain committed to improving services. There is a high degree of satisfaction overall and the program continues to move forward with positive changes. Service delivery is the cornerstone of services provided by MOI and they are shifting focus back to build a new foundation. I wish MOI the best of luck and respect their courage to struggle onwards to improving quality.

The corrective action/letter of contract deficiency is still open and pending. Findings from the attached QAOS's are addressed and closed.

Provider: Malta Opportunities, Inc Eval Date: May 2008 Evaluators: S. Carpenter/C. Frederickson Appendix DESK REVIEW: or QAOS Accreditation: Accreditation is no longer required by the state contract. Significant Events from the Agency: -- MOI promotes and actively participates in Special Olympics and the Montana Law Enforcement Torch Run. -- New living room furniture was purchased for the group home. -- A 1997 Dodge Dakota pickup was purchased for the WAC production transportation needs. -- No monthly board of directors meetings have been cancelled due to lack of a quorum. -- MOI was awarded a grant from the Community Foundation to purchase new chairs for the WAC lunch area. QAOS #7 Zero turnover of staff at WAC. **QAOS #4** -- MOI was able to facilitate and support a move for an individual from the group home into supported living. --MOI conducted a satisfaction survey that included stakeholders, local business and staff. 50 surveys were sent out with 22 returned for a 44% return. Comments include, "MOI makes it possible for the clients to have a life" to "...the building is the pitts. Cold in winter/hot in the summer..." to "An excellent program that provides a safe, nurturing environment for the handicap." QAOS#6 Agency Internal Communications Systems: MOI uses a system of pass on communication logs. -- MOI also uses a weekly managers meeting to go over medical reports. Policies and Administrative (DDP) Directives -- Policy manual is organized however has not been updated since 2003 (exception of Incident Management). Policy contains information that is out of date and not relevant to current operations.

Eval Date: May 2008 Evaluators: S. Carpenter/C. Frederickson Appendix **DESK REVIEW:** or QAOS Fiscal (audits, cost plans, invoices): -- MOI received a DD rates analysis by the DPHHS Quality Assurance Division and recommendations: 1. determine allocation of administrative time with a time study (MOI responded saying they would do 2 week-long administrative time studies 2x year) 2. match revenues to expenses (MOI responded saying they are matching revenues to the month they are earned by creating an invoice matched to the month services were provided starting July 1, 2007) 3. adjust year end grant (completed) 4. client funds: a.) separate bank accounts, b.) use 2 signatures, c.) 2 consumers frequently over \$2000 resource limit (MOI responded saying they would begin the process of establishing separate bank accounts for client funds that are separate from SSI/SSA funds with complete documentation of expenses and deposits and that MOI will review the Guide for Organizational Representative Pavees. --overall, the audit indicated that MOI had a net increase from FY '07 of \$35,712; MOI indicated it was to be used to increase staff salaries and for capital improvements. Licensing:
-- MOT received a temporary group home license due to expire in October 2008. Issues of deficiencies included: 1.) APS **QAOS #1** investigations into reports of exploitation of individuals personal property by staff, 2.) APS investigation into report of neglect, 3.) site visits revealed rights of individuals being restricted without team approval, 4.) site visits revealed plan of care not implemented and 5.) overall maintenance decline in that the bathrooms were noted to have mold, ceiling fans were dusty. MOI was missing a fire drill for April 2008. QAOS #5

Provider: Malta Opportunities, Inc

Eval Date: May 2008 Evaluators: S. Carpenter/C. Frederickson Appendix DESK REVIEW: or QAOS Quality Assurance Observation Sheets: (trends from past year) -- MOI was issued QAOS to include client rights, APS involvement and Licensing deficiency. Further review indicated issues not resolved and a corrective action is currently in process. Medication Errors: (trending from past year) -- Medication errors are still being reported as in the years past. However, it was discovered that management of the medication delivery system was not following the internal policy and communications issues were having a negative impact on the consumers. This was addressed in the corrective action. Incident Management: (summary trends, steps to address trends, investigation summaries) -- MOI has stepped up incident management with the Incident Management committee. This committee has established a set QAOS #3 routine of meetings which include personnel from all areas of MOI along with the CM and QIS. Minutes are kept and follow up is being done.

Provider: Malta Opportunities, Inc.

Provider: Malta Opportunities, Inc. Eval Date: May 2008 Evaluators: S. Carpenter/C. Frederickson Appendix Staff Related: or QAOS Evidence Found of Orientation Training (mark 'yes' if present, 'no' if not present) staff initials TP JR RT yes/no ves ves yes Note where evidence found: **Evidence Found DDCPT or equivalent:** staff initials JR RT TP Yes yes/no No No Note where evidence found: **Evidence of Criminal Background Checks:** staff initials RT TP JR yes/no NO Yes Yes QAOS #2 Note where evidence found: personnel files, staff training records, agency employment application Evidence of Staff Survey: staff initials JR RT TP ves/no Yes n/a n/a Note where evidence found: Comments: (regarding staff hiring, screening, training, supervision)

1st aid/CPR Abuse Prevention Client Rights Incident Reporting Confidentiality IP/PSP Process CDS complete w/in 6 months of hire date? V V V V V V V V V V V V V V V V V V V	staff initials	JR	RT	TP		1
Client Rights Incident Reporting Confidentiality IP/PSP Process V V V V V V V V V V V V	1st aid/CPR	~	~	~		1
Incident Reporting ✓ ✓ ✓ Confidentiality ✓ ✓ ✓ IP/PSP Process ✓ ✓ ✓	 Abuse Prevention	~	~	~		1
Confidentiality IP/PSP Process	Client Rights	~	~	~		1
IP/PSP Process ✓ ✓ ✓	Incident Reporting	~	0	0		1
	Confidentiality	V	~	~		1
CDS complete w/in 6 months of hire date? ✓ n/a n/a	IP/PSP Process	~	0	~		1
	CDS complete w/in 6 months of hire date?	~	n/a	n/a		1
Medication Cert ✓ 🛇 🛇	Medication Cert	V	0	0		1

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson IP Checklist: check if evidenced	Note Site F	Reviewed:							Appendix or QAOS
Consumer Initials	GH1	GH2	GH3	GH4	GH5	SL1	SL2	WAC1	
Consumer/Family Survey	*	~	~	~	~	~	~	~	1
PSP/IP Doc Avail to all Staff	V .	~	~	~	~	~	~	~	7
IPP/Actions Implemented	~	~	V	~	~	~	~	~	7
Data for IPP/Actions Data Internally Monitored	~	0	0	0	0	0	0	~	_
Data Internally Monitored	0	0	0	0	0	0	0	0	_
Self Medication Objective	~	~	~	~	*	~	-	n/a	
Consumer informed of grievance		-							
procedure	-	✓	*	✓	-	✓		•	
SL consumer choice of SL staff	n/a	n/a	n/a	n/a	n/a	~	~	n/a	
Rights Restrictions	n/a	n/a	n/a	•	n/a	n/a	n/a	n/a	
PSP/IP Checklist	~	~	~	~	~	~	~	~	
PSP/IP Annually?	~	~	~	*	~	→	~	~	
Individual Needs Addressed?	~	~	~	~	→	~	~	~	
Assessment Based?	~	*	~	~	~	~	~	~	
N Quarterly Reports?	V	~	~	~	~	~	~	~	
P Incident Reports Addressed?	~	→	~	~	· ·	~	~	~	
Behavioral Supports Addressed?	n/a	n/a	n/a	~	n/a	n/a	n/a	n/a	7
T Functional Analysis Needed?	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	
Free from Aversive Procedures?	~	~	~	~	~	V	~	~	

Comments: (regarding service planning and delivery)

MOI is under corrective action for the lack of implementation of plan objectives and keeping accurate and orderly data as well as the lack of internal monitoring. For more information, please see attached corrective action letter of contract non-compliance and MOI's responses which are being implemented and monitored at the time of this review.

umer Initials Consumer/Family Survey PSP/IP Doc Avail to all Staff							Appendi or QAOS
Consumer/Family Survey	CS1	CS2	CS3				10.00
DSD/ID Dog Avoil to all Stoff	~	>	~				
P PSP/IP DOC Avail to all Stall	Y	>	~				 7
IPP/Actions Implemented	~	~	~				┪
IPP/Actions Implemented Data for IPP/Actions Data Internally Monitored	~	V	~			"	
Data Internally Monitored	~	>	~				_
Self Medication Objective	~	>	···				7
Consumer informed of grievance							
procedure	~	✓	~				
SL consumer choice of SL staff	~	Y	~	·			7
Rights Restrictions	n/a	n/a	n/a				7
PSP/IP Checklist	~	>	~				
PSP/IP Annually? Individual Needs Addressed?	~	>	¥	17	70.4		7
Individual Needs Addressed?	✓	~	4				7
Assessment Based?	~	y	~				
Quarterly Reports?	~	~	V				7
Quarterly Reports? Incident Reports Addressed? Behavioral Supports Addressed? Functional Analysis Needed?	~	~	→				
Behavioral Supports Addressed?	n/a	n/a	n/a				
	n/a	n/a	n/a				
Free from Aversive Procedures?	~	•	~				14

Eval Date: May 2008

Name	ial Site Checklist: check if evidenced or mark	GH	SL1	SL2	WAC	or QAOS
	Bathing procedures posted	<u> </u>	n/a	n/a	n/a	-
\mathbf{H}	Clean/Sanitary Environment	0	-	~	n/a	QAOS #1
e	Egress	~		~	n/a	1
e a	Hot Water Temps	116	n/a	n/a	n/a	-
1	Emergency Assistance	~	~	~	n/a	7
7	Fire Extinguishers/smoke Detectors	~		~	n/a	1
h	1st Aid/CPR Supplies Accessible/Available	~	· •	~	n/a	1
11	PRN Medications	~	~	~	n/a	
2	Medication Procedures	0	· ·		n/a	=
ัด	Medication Locked Storage	~	~	~	n/a	1
Ŧ	Medication Administration Records	0	✓	~	n/a	1
Safety	Staff Ratios or ICP staffing	<u> </u>	*	~	n/a	-
	Awake Overnight Staff	~	n/a	n/a	n/a	
	Adequate Supplies	~	✓	~	n/a	
y	Storage of Supplies	~	·	~	n/a	
	Free from aversive procedures?	~	→	~	n/a	
7	Weekly integrated activities	0	n/a	n/a	n/a	
	House or Site Rules	~	n/a	n/a	n/a	1
1	Opp for choice, self determination	~	·	~	~	1
i	Meal Prep, Mealtime	~	✓	~	n/a	1
10	Engagement in Daily Life	~	✓	~	~	QAOS#
	Participation in Daily Living Skills	~	~	~	~	7
V	Daily Leisure Opportunities	0	n/a	n/a	n/a	7
Ŋ.	Staff Trained in Individual Specifics	~	✓	~	~	T

- --Licensing found the group home to be unsanitary in the bathrooms with mold, ceiling fan dust and general disrepair.
 --Supported Living is a strength for MOI...individuals are involved in their daily lives and well accepted into the community.

siden	rs: S. Carpenter/C. Frederickson tial Site Checklist: check if evidenced or ma		of site review					Appendix or QAOS
e Nam	ne	CS1	CS2	CS3				01 42400
	Bathing procedures posted	n/a	n/a	n/a				1
H	Clean/Sanitary Environment	~	~	~				7
e	Egress	~	~	~				7
a	Hot Water Temps	n/a	n/a	n/a		 7		
1	Emergency Assistance	v	~	~				
ŧ	Fire Extinguishers/smoke Detectors	y	*	¥				7
ħ	1st Aid/CPR Supplies Accessible/Available	*	*	~				7
•	PRN Medications	n/a	n/a	n/a				
2	Medication Procedures	n/a	n/a	n/a				7
ធ	Medication Locked Storage	n/a	n/a	n/a				7
F	Medication Administration Records	n/a	n/a	n/a				
<u></u>	Staff Ratios or ICP staffing	n/a	n/a	n/a	1	 		1
7	Awake Overnight Staff	n/a	n/a	n/a	i i			1
Safety	Adequate Supplies	~	~	~				1
y	Storage of Supplies	~	~	~				
	Free from aversive procedures?	~	~	~				
7	Weekly integrated activities	n/a	n/a	n/a			1	
,	House or Site Rules	n/a	n/a	n/a				┪
Ш	Opp for choice, self determination	~	~	~		 		1
1	Meal Prep, Mealtime	n/a	~	~			1	
l	Engagement in Daily Life	~	~	~				1
	Participation in Daily Living Skills	~	~	_	†			- 1
7	Daily Leisure Opportunities	n/a	n/a	n/a		 		_
	Staff Trained in Individual Specifics	~	~ ~	_	<u> </u>			1

Provide	r: Malta Opportunities, Inc								
	te: May 2008								
	ors: S. Carpenter/C. Frederickson	_							Appendix
	ntial Site Checklist: check if evidenced								or QAOS
Site Nan									
700	Driver Orientation Program			<u> </u>					
T	Wheelchair tie downs								
I.	Wheelchair Lift					1			
a	Driver's Licenses								
n	Emergency Supplies								1
S	Fire Extinguisher								
P	Transportation Log								1
a l	Scheduled Maintenance Program			İ		1		1] :
ř	TrainingStaff Doing Maintenance Checks	<u> </u>			1				1
4.	Procedures for Timely Repairs							1	1
	MDT inspection on file (MDT vehicles only)	<u> </u>						1	1
4	Comments:	· ··					'	· · · · · · · · · · · · · · · · · · ·	1
ransportation	Malta Opportunities, Inc. does not operat	e any vehic	les at this ti	me. They to	irned over t	heir vehicle	s to become	e	
1	consolidated with Philips County Transit								
0	authority has control of transportation and								
n	required to have training set forth by the								
Comme	nte:								
COMMINE	nts.								

f Su	ors: S. Carpenter/C. Frederickson urvey: check if 'met', 0 if 'unmet'								Append or QAO
f Initi		VW	KE	BB					QAOS#
A	Allegations are reported to? (APS)	0	0	0					1
	Do you notify Supervisor first? (NO)								1
ŭ	Steps to take if abuse is discovered?								7
Abuse	Comments: All staff surveyed insisted that the super	visor be notified	d first.						
<u> </u>	Suspect theft of gloves, steps to take?		<u> </u>	~	<u> </u>	· · · · · · · · · · · · · · · · · · ·	1	T	
	IP/PSP requests Doctors appt	-					,		1
L	No jacket, -25 consumer wants to leave	~	~	V					1
5	Review Rts Restriction			÷				 	1
rights	describe consumer behaviors					F	1	T	
h	staff response to behaviors by plan	-	<u> </u>		 		<u> </u>		4
b	list proactive or environmental strategies	<u> </u>	· · · · · · · · · · · · · · · · · · ·	ļ				 	-
n p	Comments:					,			
	former employee wants info	¥	~	~					
	what is consumer information?		4						
	training to meet health and safety needs?	· · ·	~						, I
ĭ	emergency evacuation procedures?			<u> </u>					
or entata on	Comments:								

nitia		VW	ect answe	BB	I				or QA
1	describe procedure to assist with meds	-		, i					1
	if med is unavailable?		~	~					1
	if gave wrong med?	<u> </u>	~	~					1
	if moving to a new place or gets new med?								1
	requirement to assist with meds?				1				1
	describe PRN or OTC is to be given					-			1
	what constitutes a med error?	· ·	ļ						1
	steps to avoid power struggles		Ι	<u> </u>	<u> </u>	Ι	I	T	
	how to respond to someone who is upset	<u> </u>	ļ — ,	-					-
	what is you start to lose control?								=
J.	Comments:	~	~	~		l	!		4
	when do you fill out an incident report?		~						1
L	notifications for ER?								1
	consumer to consumer incidents	~	~	~					
-	who writes the IR?	~		~					
	Comments:								

Eval Date: May 2008 Evaluators: S. Carpenter/C. Frederickson Appendix Staff Survey: check if 'met', 0 if 'unmet' with notation of incorrect answer or QAOS Staff Initials KE BB consumer destroying things V behaviors staff pinches consumer back ¥ ¥ how do you know a support plan is needed? Comments: what is IP/PSP based on? V you have an idea for an objective..... why do assessments? How do you find out what someone would like to do? Comments: Comments:

Provider: Malta Opportunities, Inc

Provider: Malta Opportunities, Inc. Eval Date: May 2008 Evaluators: S. Carpenter/C. Frederickson Appendix Consumer Questionnaire (used by QIS). Check if evidenced. 0 if not ask Bolded questions are mandatory or QAOS Consumer initials GH3 GH4 SL1 SL2 WAC1 Consumer has/showsID card? (if PSP documents this is not applicable, mark NA) Do you have nice staff at home/work? Is anyone mean to you at home/work? Do you like where you live/work? Are you ever afraid of anyone? Someone hits/hurts you, who can you tell? staff 911 CM CM mom Does anyone talk to you about this? ves yes yes yes yes Can you get help when you need it? S from staff? U from Case Manager? Can you get your own food/drink? m Do people come into your house/room w/o knocking/permission? e Do staff ever take things from you? Can you get rides to places you need to go? Rides to the places you want to go? Who is your Case Manager? Keenie Keenie Keenie Keenie Keenie Does s/he talk to you about waiver services? yes yes yes yes yes Does s/he help you get what you need? yes yes yes yes yes Comments:

Provider: Malta Opportunities, Inc Eval Date: May 2008 Evaluators: S. Carpenter/C. Frederickson Appendix Consumer Questionnaire (used by QIS). Check if evidenced. 0 if not ask Bolded questions are mandatory or QAOS Consumer initials CS CS2 Consumer has/showsID card? (if PSP documents this is not applicable, mark NA) Do you have nice staff at home/work? Is anyone mean to you at home/work? Do you like where you live/work? Are you ever afraid of anyone? Someone hits/hurts you, who can you tell? April keenie sister Does anyone talk to you about this? yes yes yes Can you get help when you need it? S from staff? U from Case Manager? Can you get your own food/drink? m Do people come into your house/room w/o knocking/permission? Do staff ever take things from you? Can you get rides to places you need to go? Rides to the places you want to go? Who is your Case Manager? Keenie Keenie Keenie Does s/he talk to you about waiver services? yes yes ves Does s/he help you get what you need? yes yes yes Comments:

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson **Appendix** Consumer Questionnaire (used by QIS). Check if evidenced. 0 i Bolded questions are mandatory or QAOS Consumer initials GH1 GH2 GH₅ Who helps this person and how? Are there some staff/peers they like better? Staff/peers they don't like? Why? Current needs not being met? Health and Safety related? Who do you talk to about these concerns? Does the person have input to his/her life? If you have concerns, who do you talk to? are they resolved? What are this persons wishes/dreams? is the plan moving that direction? what would make things better? does this person ever seem afraid? are you afraid for them? Does this person know how or where to report abuse? No No No who provided that training? No one No one No one Who will the individual call or report to? who provided that info? Does the person have transportation to all services and places s/he would like to go? who is the person's case manager? Keenie Keenie Keenie Does CM help the person access services? Yes Yes Yes Does the CM explain waiver services? Yes Yes Yes Does the person understand this info? No No No Comments: Staff felt that the individuals would not be able to understand what abuse is or how to report it. Staff rely on knowing the individuals

moods and personality to be able to discern if something is wrong.

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

consumer: CS3 Hour per ICP:	
Actions per PSP	Evidence support provided consistently?
computer education 30 minutes weekly	no
2. office skills/assistant	yes
3. transportation	yes
monthly safety checks	yes
	F.
Protocols:	Evidence staff clearly understood and were able to implement protocol?

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff

were able to accurately describe the supports necessary for the individual.

consumer: CS2 Hour per ICP:	
Actions per PSP	Evidence support provided consistently?
transpiration for work and social	yes
practice money skills	yes
computer education 30 minutes weekly	no
monthly safety checks	yes
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Protocols:	Evidence staff clearly understood and were able to implement protocol?

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff

were able to accurately describe the supports necessary for the individual.

consumer: CS1 Hour per ICP:	
Actions per PSP	Evidence support provided consistently?
Transportation miles	yes
2. computer education 2 hours/mo	yes
3. safety checks per TA	Yes
4. Social outing 1x month	yes
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Protocols:	Evidence staff clearly understood and were able to implement protocol?
safety checks	yes
	1.
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Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

consumer: WAC1 day Hour per ICP: 11/wk	
Actions per PSP (IP 6/28/07)	Evidence support provided consistently?
wooden craft project	yes
shopping in community 1x month	no
Protocols:	15. idama staff alamin, in tanka adama wan alala ta imalama ta mata ada
PTOLOCOIS:	Evidence staff clearly understood and were able to implement protocol?
	

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

consumer: SL2 Total res/day Hour per ICP: 14/week	
Actions per PSP	Evidence support provided consistently?
continue with day and SL services with MOI	Yes
2. job at bank per I/S	NO
3. continue with PALS	Yes
4. go to Havre to shop	Yes
5. new VCR/DVD	Yes
6. clinic for order for companion animal	yes
7. look for new kitten	no
8. kitty upkeep	not implemented yet
9. Keep in touch with friend (dropped as she moved back to Malta)	
10Trip to Hawaii research by staff	no
11. go to Minot fall festival	no
12. Charlie Pride concert	Yes
13. look at new bedroom set	Yes
14. invoice IM account to pay for set	Yes
Protocols:	Evidence staff clearly understood and were able to implement protocol?

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

congument SL4. Total realitary Harmon ICD: 45h.d.	
consumer: SL1 Total res/day Hour per ICP: 15/wk	
Actions per PSP (IP 5/24/07)	Evidence support provided consistently?
safety checks	yes
outside job support	no
3. burial account	yes
self advocacy	no
5. New ID card	yes
Protocols:	Evidence staff clearly understood and were able to implement protocol?
7.100000.	Extended staff deathy and discount and well able to implement protectors
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Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

consumer: GH5 Total res/day Hour per ICP: 51.7/wk	
Actions per PSP	Evidence support provided consistently?
assist with adding verbs into vocab. Per I/S	Yes
2. picture communication 1:1 per I/S	Yes
3. combine verbs/nouns in use per I/S	Yes
4. sing a longs per I/S	Yes
5. check for weekly events to attend	Yes
6. hygiene tasks per I/S	yes
7. attend outing	yes
Protocols:	Evidence staff clearly understood and were able to implement protocol?
1. verb I/S	no
Picture communication I/S	Yes
3. verb/noun I/S	no
4. sing a long I/S	Yes
6. Hygiene I/S	Yes

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

consumer: GH4 Total res/day Hour per ICP: 49.6/week	
Actions per PSP (IP 8/16/07)	Evidence support provided consistently?
1. pursue music lessons	no
2. extra outing 1x weekly	no
3. check writing	yes
4. med programs	yes
5. sew for production at WAC 2x weekly	no
6. DRI/DRO	no
7. Circles Program per TA (rights restrictions)	yes
	8
Protocols:	Evidence staff clearly understood and were able to implement protocol?
DRI/DRO	no
Circles Programs	yes

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

For consumer's sampled, list the PSP actions and documentation supporting the delivery of those services. List all protocols and determine whether staff

were able to accurately describe the supports necessary for the individual.

concurrer CU2 Total regider House per ICD: 226-1-	
consumer: GH3 Total res/day Hours per ICP: 32/wk Actions per PSP (IP 3/28/07)	Evidence augment previded consistently 2
4. review his related to a feet in warm as a the	Evidence support provided consistently?
review bicycle safety in warm months	yes
2. do 1 yard task weekly	no
3. task list per TA	no
appropriate social cues with female	yes
5. 2x monthly, cook new dish	no
laundry review	no
Protocols:	Evidence staff clearly understood and were able to implement protocol?
task list TA	no

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

consumer: GH2 Total hours day/res Hour per ICP: 51.7/wk	
Actions per PSP (IP 5/24/07)	Evidence support provided consistently?
Outdoor chores 2x monthly	No
2. 1 hour of paid production at WAC	Yes
3. learn 4 new signs/review current signs	yes
4. 2 weekly chores from list	yes
5. Hygiene practice daily	No
6. obtain current ID card	Yes
7. Purchase sturdy patio furniture	Yes
Protocols:	Evidence staff clearly understood and were able to implement protocol?

Eval Date: May 2008

Evaluators: S. Carpenter/C. Frederickson

consumer: GH1 Total Res/day Hours per ICP: 51.9/week	
Actions per PSP	Evidence support provided consistently?
1. library outing	yes
2. 1:1 staff support, spend 1/2 hour interacting at library per I/S	Yes
3. Visits with advocate	yes
4. Transportation to advocates house	yes
5. GH mgr will research options for interactions with small animals	yes
6. GH staff will schedule monthly visits	yes
7. GH staff will assist with proper animal handling per I/S	yes
8	
Ψ.	
Protocols:	Evidence staff clearly understood and were able to implement protocol?
2. Library visit I/S	Yes
7. Animal handling I/S	Yes
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